

## **NATIONAL MARINE SANCTUARY ADVISORY COUNCIL YOUTH SEAT APPLICATION FORM**

Before applying for advisory council membership, please review:

- (1) the advisory council charter provided in your application kit, and;
- (2) the ONMS Sanctuary Advisory Council Implementation Handbook available online at <http://www.sanctuaries.noaa.gov/management/ac/acref.html> (or you may obtain a copy from your local sanctuary – see contact information below).

The council charter outlines the purposes and governs the operation of the council; the handbook provides broader operational requirements for councils. In applying for council membership, you are agreeing to abide by the terms of the charter and the handbook if you are selected as a member or alternate.

As a part of the selection process, please note the Office of National Marine Sanctuaries (ONMS) will conduct a LEXIS/NEXIS check and a departmental bureau check for potential conflict of interest and other issues in your background.

Review the information provided at the end of this form; it contains important guidance with regard to the information you submit on this form and its availability under federal law. Note that the terms “youth” and “student” are interchangeable in this application form.

Students filling the youth seat must:

- ❖ Be a minimum of 14 years of age when they apply;
- ❖ Attend a school, including home schools, in the area affected by the sanctuary;
- ❖ Have proven ability to communicate and network with other students within their school, in other schools within his/her community, and/or with home schooled students.
- ❖ Possess an interest in sanctuary resource protection and management;
- ❖ Have experience and/or knowledge regarding public uses and activities in the sanctuary;
- ❖ Be able to travel to and attend council meetings and retreats (parent/guardian or student provides transportation);
- ❖ Provide written recommendation from one or more teachers; and
- ❖ Serve a maximum of two years, until they reach their 18<sup>th</sup> birthday, or graduate from high school, whichever comes first.

Once selected, the Hawaiian Islands Humpback Whale National Marine Sanctuary staff will contact students to provide:

- ❖ Parent/guardian permission\*; and
- ❖ School permission\*.

\* Note: This will grant blanket permission for all council meetings and retreats.

**Procedure for Application:**

**Step 1:** Please provide your contact information and respond to the questions below.

**Step 2:** Have parent/guardian sign to acknowledge he/she is aware of and in support of your application.

**Step 3:** The application deadline is *June 30, 2012*. Please return all pages of this application to:

Joseph B Paulin  
Sanctuary Advisory Council Coordinator

Hawaiian Islands Humpback Whale National Marine Sanctuary  
6600 Kalaniana'ole Hwy. Suite 301  
Honolulu, Hawai'i 96825

[joseph.paulin@noaa.gov](mailto:joseph.paulin@noaa.gov)  
tel: 808-397-2651 ext.257  
fax: 808-397-2650  
web: <http://hawaiihumpbackwhale.noaa.gov>

**Date:** \_\_\_\_\_

**First Name\*:** \_\_\_\_\_ **Middle** \_\_\_\_\_ **Last** \_\_\_\_\_

\* Please include full first, middle and last names.

**Seat applying for:** \_\_\_\_\_ Youth Seat (non-voting)

**Home Address:** \_\_\_\_\_

\_\_\_\_\_

**Home Phone:** \_\_\_\_\_

**Home Fax:** \_\_\_\_\_

**Parent/Guardian E-mail:** \_\_\_\_\_

**Student E-mail:** \_\_\_\_\_

**Parent/Guardian Acknowledgement:**

I acknowledge that I am aware of and support my son/daughter or ward applying for and potentially serving on the Hawaiian Islands Humpback Whale National Marine Sanctuary Advisory Council.

**Parent/Guardian Printed Name:** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_

Please thoroughly address each of the following:

1. Explain why you are interested in serving on the council.
2. Explain your views regarding the protection and management of marine or Great Lake resources, both natural (fish, coral reefs, etc) and cultural (shipwrecks).
3. Describe what you think the role of the council is, and how you will work to best support the sanctuary while on the council.
4. Describe the unique knowledge and/or experience you offer the council.
5. Include the length of time you have lived in the community near the sanctuary.
6. List other groups you belong to or affiliations you have (e.g. student council, science club, soccer team, hiking club, scouts, employment).
7. Describe how much time you have to give to the council.
8. Describe how you will consult and share information with your peers in the community.
9. Include other qualifications or information that would benefit the council.

Individuals 18 years of age and older are not eligible to apply for the sanctuary advisory council's youth seat, but may apply for other council seats as they become open and are advertised.

The information obtained through this application process will be used to determine the qualifications of the applicant for membership on the sanctuary advisory council. The ONMS intends affirmatively to disclose the applications only to ONMS staff and other members of the review panel. However, the ONMS may be required to disclose the applications in response to a court order, a congressional request, or a request from the public under the Freedom of Information Act (FOIA).

If disclosure is requested under the FOIA, the ONMS will endeavor to protect the privacy of applicants by withholding personal information such as home addresses and telephone numbers. In contrast, statements of philosophy or opinions contained in the application would likely be released. Applying for membership on the council is voluntary.

Public reporting burden for this collection of information is estimated to average one hour per response, including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Office of National Marine Sanctuaries, 1305 East West Highway, N/ORM6, Silver Spring, Maryland 20910.

Notwithstanding any other provision of law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.

OMB Control #0648-0397  
Expires 03/31/2012